

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>BC</i>	<i>7142.3</i>	<i>5-2-99</i> <i>5/27/99</i> <i>6-3-99</i>

INDEX OF CLAIMS

- ✓ Rejected
- Allowed
- (Through numeral)..... Canceled
- Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim		Date	
Final	Original		
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
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46	✓	✓	✓
47	✓	✓	✓
48	✓	✓	✓
49	✓	✓	✓
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Claim		Date	
Final	Original		
51	✓	✓	✓
52	✓	✓	✓
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Claim		Date	
Final	Original		
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If more than 150 claims or 10 actions
staple additional sheet here